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Bib Data Sheet

CONFIRMATION NO. 2165

SERIAL NUMBER 09/365,731	FILING DATE 08/03/1999 RULE	CLASS 345	GROUP ART UNIT 2174	ATTORNEY DOCKET NO. P65745US0	
APPLICANTS GLEN J. ANDERSON, SIOUX CITY, IA; JOHN S. LOVE, SIOUX CITY, IA;					
** CONTINUING DATA ***** <i>NONE ✓</i>					
** FOREIGN APPLICATIONS ***** <i>NONE</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/26/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
ADDRESS 30408					
TITLE Method and system for displaying non-overlapping program and auxiliary windows					
FILING FEE RECEIVED .796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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APPLICANTS

GLEN J. ANDERSON, SIOUX CITY, IA;
 JOHN S. LOVE, SIOUX CITY, IA;

** CONTINUING DATA ***** *no*

** FOREIGN APPLICATIONS ***** *no*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 08/26/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
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Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials *1/5*

ADDRESS
 30408
 GATEWAY, INC.
 ATTN: SCOTT CHARLES RICHARDSON
 610 GATEWAY DR., Y-04
 N. SIOUX CITY, SD
 57049

TITLE
 Method and system for displaying non-overlapping program and auxiliary windows

FILING FEE RECEIVED 796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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SERIAL NUMBER 09/365,731	FILING DATE 08/03/99	CLASS 709	GROUP ART UNIT 2756	ATTORNEY DOCKET NO. 98-739GTW105
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APPLICANT

GLEN J. ANDRESON, SIOUX CITY, IA; JOHN S. LOVE, SIOUX CITY, IA.

CONTINUING DOMESTIC DATA***

VERIFIED

[Signature]

NO

371 (NAT'L STAGE) DATA***

VERIFIED

[Signature]

NO

FOREIGN APPLICATIONS***

VERIFIED

[Signature]

NO

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/26/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
Verified and Acknowledged <u><i>[Signature]</i></u> Examiner's Initials _____ Initials _____					

SEE CUSTOMER NUMBER: 020121

ADDRESS

TITLE

INDEPENDENT STATUS AND HELP DISPLAY

FILING FEE RECEIVED \$796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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